

2017 Campership Application

Every year we do our best to see that we provide the camp experience for as many children and youth as possible. Thanks to annual donations from Calvin Crest's supporters, we are able to offer partial scholarships known as Camperships. Calvin Crest's Campership Fund is a limited amount that our donors give to annually. You can apply for a Calvin Crest partial campership based on need, special circumstance, or both. In order to make need-based partial camperships equitable to all, we are following a model that is similar to the California Special Milk Program. PLEASE NOTE: If a camper is attending multiple camp sessions Calvin Crest will only provide a partial campership for one camp session.

Camperships cannot be combined with any other Backyard, Early Bird, or Church Discount.

If you have any questions please call the Registrar at (559) 683-4450 ext 205 or email calvinreg@calvincrest.com.

To apply:

- 1. Please fill out the enclosed **Campership Application** thoroughly. If applying for a campership based on income, you must fill out the "yearly household income" section; camperships cannot be rewarded without this information. If applying for a campership based on special circumstance, please include a detailed description of your circumstance.
- 2. If attending with a church, return the application to your church Registrar, Youth Pastor, or Pastor to complete and return to Calvin Crest along with your completed registration form or online registration.
- 3. If attending as an individual, return Campership Application via mail, fax, or email.

Mail To:

Calvin Crest Conferences Attn: Registrar 45800 Calvin Crest Road Oakhurst, CA. 93644

Fax To: (559) 683-7118

Email To: calvinreg@calvincrest.com



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Camper Name (First & Last)			Ses	Session(s) Attending			
Parent/Guardian Name (Print)		Parent/Guardian Signature		1	Date		
Address					,	Apt#	
City				State		Zip	
Home Phone	Cell Phone			Email			
Total # in Household To			Total Ye	otal Yearly Household Income (Parents/Guardians Combined Income)			
Please provide a description of the financial need or other special circumstance:							
pproximately what is the partial Will the Camper be able to attend camp if partial campership is not		Wh	Why or why not?				
requesting?	received? (Circle One)						
\$	YES/NO						
Has the camper been to Calvin Crest before? (Circle One)				If "Yes," please list year and what camp they attended:			
YES/NO							
Church Affiliation (IF NONE STOP HERE)							
Church Name							
Address Cit				ty State Zip			
Church Phone				Church Fax			
Will the Church be providing financial Assistance? (Circle One) YES/NO			If "	If "Yes" what is the amount?			
Name of the person at the church who is authorizing that amount:							
Registrar/Pastor Name (Print) Registrar/Pastor S			r Signat	gnature Date			
Registrar/Pastor Phone			Reg	Registrar/Pastor Email			

Thank you for your application.

You will receive an email detailing campership receipt and the awarded amount within two weeks of receiving your application.

Please verify that the email above is accurate.